



PTO/SB21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10564,340
	Filing Date	11 January 2006
	First Named Inventor	GODWIN, Antony Robert
	Art Unit	TBA
	Examiner Name	TBA
	Attorney Docket Number	POLYT 9381 WO-US
Total Number of Pages in This Submission		215

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declarations(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Declaration, executed; Return receipt postcard, IDS references (Refs 4-14; 199 pages)
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Bell & Associates	
Signature		
Printed name	Matthew Kaser	
Date	14th February 2006	Reg. No. 44,817

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Matthew Kaser	Date 14th February 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 130.00

Complete if Known

Application Number 10/564,340
Filing Date 11 January 2006
First Named Inventor Godwin, Antony Robert
Examiner Name TBA
Art Unit TBA
Attorney Docket No. POLYT 9381 WO-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-3194 Deposit Account Name: Bell & Associates
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP =	x	=
Fee Paid (\$)		

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Late Filing Surcharge, Oath or Declaration **Fee Paid (\$)** 130.00

SUBMITTED BY

Signature [Signature] Registration No. 44,817 Telephone (510) 537-2040
Name (Print/Type) Mathew Kaser Date 14th February 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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hereby certify under 37 C.F.R. § 1.8 that this document and referenced attachments are being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to:
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P.O. Box 1450, Alexandria, VA 22313-1450
on 14th February 2006
Printed: Matthew R. Kaser

Signed: 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. National Phase Application under 35 USC § 371 of:
GODWIN, Antony, Robert; PEDONE, Elisa; CHOI, Ji-Won; SHAUNAK, Sunil, and
BROCCINI, Stephen, James

Title: Conjugated Biological Molecules and their Preparation

US Serial No. :	10/564,340
US Filing date:	11 January 2006
International application number:	PCT/GB2004/002994
International Filing Date:	12 July 2004
Priority application number:	GB0316294.8
Priority date:	11 July 2003

To:
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Enclosed:
Return receipt postcard
Transmittal form (1 page)
Fee Transmittal form (1 page, **in duplicate**)
Transmittal cover letter (2 pages)
Declaration, executed (6 pages)
Powers of Attorney, executed (5 pages)
Cover letter for Information Disclosure Statement (1 page)
Information Disclosure Statement (2 pages)
Set of Publications (IDS References 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, & 14; 199 pages)

Applicants herewith submit an executed Inventors' Declaration and executed Powers of Attorney. The commissioner is hereby authorized to charge the sum of **\$130** as late filing surcharge (large entity) for an executed declaration to **Bell & Associates Deposit Account No. 50-3194**.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Bell & Associates Deposit Account No. 50-3194.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'MATKAS', with a long horizontal flourish extending to the right.

Matthew Kaser, D.Phil.
Reg. No. 44,817

Bell & Associates,
416 Funston Avenue, Suite 100,
San Francisco, California 94118
Tel: (510) 537-2040
Fax: (415) 276-6040
mkaser@bell-iplaw.com



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of : GODWIN, Antony Robert, et al.

Title: CONJUGATED BIOLOGICAL MOLECULES AND THEIR PREPARATION

Serial No.: 10/564,340

Filing Date: 11th January, 2006

371(c) Date: Unknown

Examiner: TBA

Group Art Unit: TBA

Mail Stop PCT
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. §1.97
and §1.98

Dear Sir:

Applicant herewith submits an Information Disclosure Statement (IDS) under the provisions of 37 CFR § 1.97 (b)(1) and § 1.98 in the above-referenced utility patent application. Applicant herewith includes eleven (11) copies of publications cited in Form 1449 (Reference 4, Reference 5, Reference 6, Reference 7, Reference 8, Reference 9, Reference 10, Reference 11, Reference 12, Reference 13, and Reference 14).

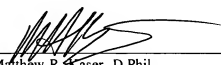
Applicant believes that, since this IDS has been filed at the US PTO prior to a first Office action on the merits of the claimed invention, no fee is due. However, if the Commissioner determines that a fee is due, the Commissioner is hereby authorized to debit the fee from Bell & Associates Deposit Account No. 50-3194.

Respectfully submitted,

Date: 14th February, 2006

Bell & Associates
416 Funston Ave., Ste 100
SAN FRANCISCO CA 94118

By:


Matthew R. Kaser, D.Phil.
Registration No. 44,817
Direct Telephone: (510) 537-2040

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PTO/SB/08B (07-05)
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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 2 of 2

Complete if Known

Application Number	10/546,340
Filing Date	11 January 2006
First Named Inventor	Godwin, Antony Robert
Art Unit	TBA
Examiner Name	TBA
Attorney Docket Number	POLYT 9381 WO US

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.†	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	10	WILBUR, D.S., et al.; Bioconjugate Chem. 1994 pp. 220-235, vol. 5	
	11	ROBERTS, M.J., et al.; Advanced Drug Delivery Reviews 2002 pp. 459-476, vol. 54	
	12	del ROSARIO, R.B., et al.; Bioconjugate Chem. 1990 pp. 51-59, vol. 1	
	13	Liberatore, F.A., et al.; Bioconjugate Chem. 1990 pp. 36-50, vol. 1	
	14	BROCCHINI, S.J. et al.; J. AM. Chem. Soc. 1988 pp. 5211-5212, vol. 110	
		title of article must be included	

Examiner Signature	/Christina Bradley/ (09/17/2008)	Date Considered	
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*EXAMINER: initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. †Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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